



## How to Apply for NOP Accreditation

### Purpose

This instruction provides procedures to be used by organic certification companies when applying for accreditation under the USDA's National Organic Program (NOP).

### Scope of this Instruction

This instruction applies to domestic and foreign certification companies (applicants) that request accreditation under the NOP. Applicants may be either private or government entities.

### Referenced Documents

Applicants for accreditation should use or refer to the following documents in order to complete the accreditation application:

- 7 CFR Part 205, National Organic Program; Final Rule
- Organic Foods Production Act of 1990
- Form TM-10CG (8-8-01) – Application for Accreditation (attached)
- Form LS-313 – Application for Service (attached)

### Policies

Each new and renewal applicant for accreditation under the NOP must submit a complete written application as described in this procedure. Unless otherwise specified in writing by the NOP, all applications and supporting documentation must be submitted in English.

All initial and renewal applications must be accompanied by a payment of \$500 (U.S. Dollars) in the form of a check or money order payable to "AMS". This payment will be applied to the fees charged by the Audit, Review, and Compliance (ARC) Branch for reviewing and reporting on the adequacy of the application.

### Procedures

#### 1. Complete Form TM-10CG – APPLICATION FOR ACCREDITATION

Form TM-10CG is one of two official forms to be completed by certifying agencies. It only needs to be completed for initial and renewal applications. This form does not need to be submitted with annual updates; however certifiers should notify the NOP Accreditation Manager in writing any time information submitted on this form changes due to business relocations, personnel changes, or other events.

Except where noted, all applications must include the following basic business information:

- a) The name of the business or entity applying for accreditation;
- b) The applicant's primary office location and address (please include both mailing and physical addresses, if different);
- c) Name of the primary contact person responsible for day-to-day operations of the certification program;

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The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, sexual orientation, marital or family status, political beliefs, parental status, or protected genetic information. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW., Washington, DC 20250-9410 or call 202-720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.



- d) Tax identification number;
- e) Telephone number
- f) Facsimile number;
- g) Internet website address and e-mail address (please provide both, if available);
- h) Enter the estimated number of operations to be certified annually for each area of operation (crops, livestock, wild crop and handling);
- i) Check the type of entity applying for accreditation (government agricultural office, not-for-profit business, for-profit business, or other, such as a membership association);
- j) After reading the affirmation statements, sign and date the form, and print or type the name and title of the person signing the form.

**2. In addition to items (a) – (j) above, applicants must submit the following documents in order to demonstrate their ability to conduct certification operations in accordance with the regulations:**

- k) A copy of the fees for all services to be provided to the applicant under the NOP regulations;
  - o Government entities must provide a copy of the official's authority to conduct certification activities under the Organic Foods Production Act and 7 CFR Part 205.
  - o Private entities must provide documentation showing the entity's status and organizational purpose, such as articles of incorporation, bylaws or ownership or membership provisions, and date of establishment.
- l) A list of each state and foreign country in which the applicant currently certifies or intends to certify production, processing or handling operations. This must include countries where operations are certified through cooperative agreements and contracted inspections with other certifiers.
- m) A copy of the applicant's policies and procedures for training, evaluating, and supervising personnel. This information should include checklists, performance acceptability criteria, training and supervisory schedules, training curriculum, and other supporting documentation. It should provide objective evidence that personnel have current training to perform in their respective functions, that they are annually reviewed, and appropriately supervised.
- n) The names and position descriptions of all personnel to be used in the certification operation, including administrative staff, certification inspectors, members of any certification review and evaluation committees, contractors, and all parties responsibly connected to the certifying agent.
- o) A description of the qualifications, including experience, training, and education in agriculture, food technology, organic production, and organic handling for:
  - o Each inspector to be used by the applicant, and
  - o Each person to be designated by the applicant to review or evaluate applications for certification.

Documents submitted under this section must clearly demonstrate that the persons performing each process within the applicant's agency are fully qualified to conduct or supervise each function for which they are responsible. The qualifications for each person who reviews applications for adequacy, reviews and approves inputs and other materials, reviews organic systems plans, conducts onsite inspections of farms or handling operations, conducts internal audits of the certification agency, or participates in certification decisions.

- p) A description of any training that the applicant has provided or intends to provide to personnel to ensure that they comply with and implement the requirements of the Organic Foods Production





Act and 7 CFR Part 205. This information should include topics to be addressed during the training and dates the training will be conducted or attended.

- q) A copy of the procedures used to evaluate certification applicants, make certification decisions, and issue certificates. These procedures must include:
- r) A copy of the procedures used for reviewing and investigating certified operations' compliance with the Organic Foods Production Act and the NOP regulations and reporting those violations to the AMS Administrator;
- s) A copy of the procedures to be used for complying with the recordkeeping requirements described in 7 CFR Part 205.501(a)(9);
- t) A copy of the procedures to be used for maintaining the confidentiality of any business-related information as set forth in 7 CFR Part 205.501(a)(10);
- u) A copy of the procedures, including any fees to be assessed, for making the following information available to any member of the public upon request:
  - o Certification certificates issued during the current and 3 preceding calendar years;
  - o A list of producers and handlers whose operations it has certified, including for each the name of the operation, type(s) of operation(s), products produced, and the effective date of the certification during the current and 3 preceding calendar years;
  - o The results of laboratory analyses for residues of pesticides and other prohibited substances conducted during the current and 3 preceding calendar years;
  - o Other business information as permitted in writing by the producer or handler;
- v) A copy of the procedures to be used for sampling and residue testing pursuant to 7 CFR Part 205.670;
- w) A copy of procedures intended to be implemented to prevent the occurrence of conflicts of interest as described in 7 CFR Part 205.501(a)(11);
- x) A conflict of interest disclosure report for all persons who review applications for certification, perform on-site inspections, review certification documents, evaluate qualifications for certification, make recommendations concerning certification, or make certification decisions and all parties responsibly connected to the certifying agent, identifying any food- or agriculture-related business interests, including business interests of immediate family members, that cause a conflict of interest;
- y) For applicants who already conduct certification operations:
  - o A list of all production, processing, and handling operations currently certified by the applicant. This must include operations certified in cooperation with or through subcontracted inspections with other certification bodies.
  - o Copies of at least 3 different inspection reports and certification evaluation documents for production, processing, or handling operations certified by the applicant during the previous year for each area of operation for which accreditation is requested.
  - o The results of any accreditation process of the applicant's operation by an accrediting body during the previous year for the purpose of evaluating its certification activities.
- z) Any other information the applicant believes may assist in the evaluation of the applicant's expertise and ability perform certification activities.



### 3. Complete LS Form – 313 – APPLICATION FOR SERVICE

This form is used to provide billing authority for the AMS Livestock and Seed Program, Audit, Review, and Compliance (ARC) Branch, which conducts document reviews and onsite audits under the NOP. Applicants for accreditation must submit this form when they first apply for accreditation. It should also be resubmitted when the billing address of the certification body changes. The form should be included in the NOP application for accreditation package. The NOP will forward this document to the ARC Branch for processing. To complete Form LS – 313:

- a) Under “NAME AND ADDRESS OF ESTABLISHMENT” print or type the street address where the certification office is located. This will be the location where onsite audits will be conducted. Do not put a post office box number here. If the certification body maintains more than one office, this information should be included in another part of the application package.
- b) Under “TAX ID #” print or type the certification company’s tax identification number.
- c) Under “TYPE OF SERVICE APPLIED FOR” click on or check the box next to “Other” and print or type “Organic Accreditation.” On the right hand side of this same area click on or check the box next to “Other” and print or type in “Certifier.”
- d) Leave the box labeled “LEGAL STATUS” blank. This information is collected elsewhere.
- e) Leave the box labeled “FINANCIAL INTEREST” blank. This information is not applicable to NOP accreditation.
- f) Under “NAME AND ADDRESS OF APPLICANT” enter the name and address of the person to whom accreditation audit billing information should be sent. This may be a street address or a post office box number where mail is received.
- g) Under “SIGNATURE OF APPLICANT OR REPRESENTATIVE AND DATE” sign and date the form after it is completed and printed out.
- h) Under “PRINT OR TYPE NAME OF SIGNEE” print or type the name of the person who signed the form.
- i) Under “SOCIAL SECURITY NUMBER” print or type the social security number of the applicant or representative who signs the form. This is not necessary if the applicant is a business and a tax identification number has been provided.
- j) Under “TELEPHONE NUMBER” print or type the phone number of the applicant or representative who signs the form.
- k) Under “E-MAIL ADDRESS” print or type the e-mail address of the applicant or representative who signs the form.

#### Submitting Documents to NOP

Documentation may be submitted as printed documents, electronic data, or both. Submitting a complete hardcopy version of the application along with a complete electronic version will help ensure the earliest possible technical review of the application.

When submitting hard copies, documents may be printed on one or both sides of the paper. It is requested, however, that documents be submitted without staples and without protective plastic sleeves in order to allow for easier scanning. Loose leaf paper in ringed binders with section separators is ideal.



United States Department of Agriculture  
Agricultural Marketing Service  
National Organic Program

1400 Independence Avenue SW.  
Room 4008-South Building  
Washington, DC 20250

NOP 2004  
Original Issue: June 28, 2005  
Distribution: All

Documents submitted electronically should be presented on compact disc (CD) in Adobe® PDF format or a similar, widely-recognized protected format to prevent alteration. E-mailed documentation is also acceptable. Files may be distributed over multiple e-mails to comply with file size limits of some Internet service providers.

Certifiers should submit their complete application package as described above to:

USDA, AMS, TM, National Organic Program  
1400 Independence Avenue, SW  
Room 4008-South  
Washington, DC 20250  
Attention: Certifier Accreditation  
Email: NOPCertifier@usda.gov

Documentation should be sent via Federal Express, United Parcel Service or other express delivery service in order to ensure timely delivery to NOP offices. Delivery services that require a telephone number should reference the NOP main office number (202) 720-3252.

#### Approval

for Barbara C. Robinson  
Acting Associate Deputy Administrator  
Agricultural Marketing Service  
National Organic Program



**U.S. DEPARTMENT OF AGRICULTURE**  
**AGRICULTURAL MARKETING SERVICE**  
**LIVESTOCK AND SEED PROGRAMS**

Please fax to (720) 497-0571

E-mail to: LSMGCB.FORMS@usda.gov

Mail original to: USDA,MRP, AMS, LS, MGCB, OFO - Denver West Office Building 53  
 13952 Denver West Parkway, Suite 350  
 Lakewood, CO 80401

**APPLICATION FOR SERVICE**

According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0124. The time to complete this information collection is estimated to average 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, sexual orientation, marital or family status, political beliefs, parental status, or protected genetic information. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal employment opportunity provider and employer.

Information provided in this application is needed to authorize USDA employees to perform the requested service (7 CFR 54.6). You may, by law, be fined up to \$10,000, imprisoned up to 5 years, or both, for knowingly or willfully making false statements within this document (18 U.S.C. Section 1001).

The undersigned hereby applies to the Meat Grading and Certification Branch, Livestock and Seed Programs, U.S. Department of Agriculture, for the furnishing of official services to be provided at the following location:

NAME AND ADDRESS OF ESTABLISHMENT WHERE SERVICE IS TO BE PROVIDED (Include Street, City, State, and ZIP - NO P.O. BOX) TAX ID # (Required by IRS)

## TYPE OF SERVICE APPLIED FOR:

- ☐ CARCASS GRADING (Check applicable species): ☐ BEEF ☐ PORK ☐ VEAL AND CALF ☐ LAMB
- ☐ PRODUCT CERTIFICATION/REPROCESSING ☐ AUDITING ☐ MEAT JUDGING ☐ CONTEST ☐ OTHER (Specify) \_\_\_\_\_

## INSPECTION INFORMATION:

US EST. NO. \_\_\_\_\_ or NFI EST. NO. \_\_\_\_\_

## OPERATIONS CONDUCTED (Check all that apply):

- ☐ SLAUGHTERING (Check applicable species): ☐ PROCESSING ☐ FABRICATING ☐ DISTRIBUTING
- ☐ CATTLE ☐ CALVES ☐ SHEEP ☐ SWINE ☐ BREEDING ☐ FEEDING ☐ SUPPORT SERVICES
- ☐ OTHER (Specify) \_\_\_\_\_ ☐ ASSOCIATION ☐ MARKETING ☐ OTHER (Specify) \_\_\_\_\_

## LEGAL STATUS (Check one):

- ☐ INDIVIDUAL OWNER ☐ PARTNERSHIP ☐ CORPORATION
- ☐ OTHER (Specify) \_\_\_\_\_

## FINANCIAL INTEREST IN THE PRODUCT (Check one):

- ☐ OWNER/PART OWNER ☐ CONTRACTOR
- ☐ OTHER (Specify) \_\_\_\_\_

## I (We), agree:

- To comply with all applicable provisions of the Federal Meat Grading and Certification Regulations, 7 CFR, Part 54 (Revised), a copy of which I (we) have received and read;
- To notify the Meat Grading and Certification Director, Office of Field Operations, in writing and in advance of my (our) cancellation of this application;
- To notify the Meat Grading and Certification Office of Field Operations immediately when a change occurs in my (our) legal status/Applicant Representative; and
- That the Federal meat grading and certification service for which application is hereby made may be denied or withdrawn at any time as provided in the Federal Meat Grading and Certification Regulations.

NAME AND MAILING ADDRESS OF APPLICANT

SIGNATURE OF APPLICANT OR REPRESENTATIVE AND DATE

SOCIAL SECURITY NUMBER (Required by NFC)

PRINT OR TYPE NAME OF SIGNED

TELEPHONE NUMBER

E-MAIL ADDRESS

TITLE OF APPLICANT OR REPRESENTATIVE 1/

## APPROVAL (FOR USE BY USDA)

DATE OF APPROVAL

TITLE OF APPROVING OFFICER

SIGNATURE OF APPROVING OFFICER

1/ Also include signature of operator of establishment (or title and signature of his/her representative) if operator is not the applicant.  
 See 54.6 of the Regulations (Revised).

U.S. DEPARTMENT OF AGRICULTURE  
AGRICULTURAL MARKETING SERVICEPlease fax to (202) 205-7808 – mail original to:  
Program Manager, National Organic Program, USDA/AMS/TM/NOP  
1400 Independence Ave. SW, Room 4008  
Washington, DC 20250**APPLICATION FOR ACCREDITATION**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0191. The time required to complete this information collection is estimated to average 93 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call 202-720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

The undersigned hereby applies for accreditation to the National Organic Program, U.S. Department of Agriculture.

Business Name, Mailing Address, and Primary Office Location (if different)

Name of person responsible for day-to-day operations:

Title of person responsible for day-to-day operations:

Tax ID#

Telephone Number:

Internet address:

Fax Number:

**PLEASE ESTIMATE THE ANNUAL ANTICIPATED NUMBER OF CERTIFICATIONS FOR EACH TYPE OF ACCREDITATION**

<b>CROPS</b>	<b>LIVESTOCK</b>	<b>WILD CROP</b>	<b>HANDLING</b>
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**LEGAL STATUS (Check one)**

<b>GOVERNMENT</b>	<b>FOR-PROFIT BUSINESS</b>	<b>NOT FOR PROFIT BUSINESS</b>	<b>OTHER (SPECIFY)</b>
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I, (We), affirm that, if granted accreditation, I (we) will carry out the provisions of 7 CFR Part 205 including:

1. Accepting the certification decisions made by another certifying agent accredited or accepted by USDA;
2. Refraining from making false or misleading claims about my (our) accreditation status, the USDA accreditation program for certifying agents, or the nature or qualities of products labeled as organically produced;
3. Conducting an annual performance evaluation of all persons who review applications for certification, perform on-site inspections, review certification documents, evaluate qualifications for certification, make recommendations concerning certification, or make certification decisions and implement measures to correct any deficiencies in certification services;
4. Having an annual internal program review conducted of my (our) certification activities by myself, my (our) staff, an outside auditor, or a consultant who has the expertise to conduct such reviews and implement measures to correct any noncompliance's with the Organic Foods Production Act of 1990 (Act) and the provisions of 7 CFR Part 205;
5. Paying and submitting fees to AMS;
6. Complying with, implementing, and carrying out any other terms and conditions determined by the Administrator to be necessary;
7. (Items 7, 8, and 9 apply only to private entities)  
Holding the Secretary harmless for any failure on my (our) part to carry out the provisions of the Act and 7 CFR Part 205;
8. Furnishing reasonable security, in an amount and according to such terms as the Administrator may by regulation prescribe, for the purpose of protecting the rights of production and handling operations that I (we) certify under the Act and 7 CFR Part 205;
9. Transferring to USDA and making available to the applicable State organic program's governing State official all records or copies of records concerning my (our) certification activities in the event that I (we) dissolve or lose my (our) accreditation.  
*Such transfer does not apply to a merger, sale, or other transfer of ownership of a certifying agent.*

SIGNATURE OF APPLICANT OR REPRESENTATIVE

PRINT OR TYPE NAME OF SIGNED

TITLE OF APPLICANT OR REPRESENTATIVE

DATE

**PLEASE ATTACH:**

1) A list of each organizational unit, such as chapters or a subsidiary office including the name, office location, mailing address, and contact numbers (telephone, facsimile, and Internet address), and the name of a contact person for each unit; 2) A copy of the fee schedule for all services to be provided under these regulations by the applicant; 3) For a government entity, a copy of the official's authority to conduct certification services under 7 CFR Part 205; 4) For a private entity, documentation showing the entity's status and organizational purpose, such as articles of incorporation and by-laws or ownership or membership provisions, and its date of establishment; 5) A list of each State or foreign country in which the applicant currently certifies production and handling operations and a list of each State or foreign country in which the applicant intends to certify production and handling operations; 6) The requirements of 7 CFR Part 205, § 205.504. Evidence of expertise and ability.

**FOR USE BY USDA**

DATE OF RECEIPT

NAME OF RECIPIENT

SIGNATURE OF RECIPIENT